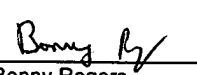



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PATENT & TRADEMARK OFFICE

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AMENDMENT TRANSMITTAL LETTER				Docket Number EMS-00201																																																			
Application Number 09/715,643	Filing Date November 17, 2000	Examiner Jung W. KIM		Group Art Unit 2132																																																			
Invention Title STORAGE BASED APPARATUS FOR ANTIVIRUS																																																							
TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application, including: <input type="checkbox"/> (X) Amendment and Response to Office Action <input type="checkbox"/> (X) Request for Change of Address <input type="checkbox"/> (X) Return Postcard CLAIMS AS AMENDED <table border="1"><thead><tr><th></th><th>(1)</th><th></th><th>(2)</th><th>(3)</th><th></th><th></th></tr><tr><th></th><th>CLAIMS REMAINING AFTER AMENDMENT</th><th></th><th>HIGHEST NUMBER PREVIOUSLY PAID FOR</th><th>PRESENT NUMBER EXTRA</th><th>RATE</th><th>FEE</th></tr></thead><tbody><tr><td>TOTAL CLAIMS</td><td>41</td><td></td><td>50</td><td>0</td><td>x \$ 50</td><td>\$ 0</td></tr><tr><td>INDEPENDENT CLAIMS</td><td>6</td><td>Minus</td><td>6</td><td>0</td><td>x \$200</td><td>\$ 0</td></tr><tr><td>MULTIPLE DEPENDENT CLAIM ADDED</td><td colspan="4"></td><td>\$360</td><td>\$</td></tr><tr><td colspan="5"></td><td>TOTAL</td><td>\$ 0</td></tr><tr><td colspan="4">If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.</td><td colspan="2">SMALL ENTITY TOTAL</td><td>\$</td></tr></tbody></table> <p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the highest number previously paid for IN THIS SPACE is less than 20, enter "20." *** If the highest number previously paid for IN THIS SPACE is less than 3, enter "3." The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.</p> <p><input type="checkbox"/> () Please charge Deposit Account Number 050889 in the amount of \$_____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> () A check in the amount of \$_____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> (X) Please credit any overpayment and/or charge any additional filing fees required under 37 CFR §§ 1.16 and 1.17 to our Deposit Account Number 050889.</p> <div style="border: 1px solid black; padding: 10px; margin-top: 20px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 12, 2006.</p><p style="text-align: center;"> Bonny Rogers</p></div> <div style="margin-top: 20px;"> _____ Anne E. Saturnelli, Reg. No. 41,290 January 12, 2006 Date</div>								(1)		(2)	(3)				CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE	TOTAL CLAIMS	41		50	0	x \$ 50	\$ 0	INDEPENDENT CLAIMS	6	Minus	6	0	x \$200	\$ 0	MULTIPLE DEPENDENT CLAIM ADDED					\$360	\$						TOTAL	\$ 0	If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.				SMALL ENTITY TOTAL		\$
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